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maintenance fee notificatio	ns.				s, and/or (b) indicating a sep	parate "FEE ADDRESS" for	
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25299 7	590 03/30/2005	101P	F 40/3	papers. Each addition have its own certificat	ial paper, such as an assignm te of mailing or transmission.	nent or formal drawing, must	
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PO BOX 12195 DEPT 9CCA, BLDG 002 RESEARCH TRIANGLE PARK, NC 27709 06/28/2005 TBESHAH2 00000023 091990 10624324				I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below.			
06/28/2005 TBESHAH2 00000023 091990 10624324 TRADE				(Depositor's name)			
01 FC:1501 1400.00 DA 02 FC:1504 300.00 DA						(Signature)	
APPLICATION NO.	FILING DATE	FIRST NAME		IVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/624,324	07/22/2003	William		onan	RPS920030145US1	7303	
TITLE OF INVENTION: S ENVIRONMENT	YSTEM & METHOD OF I	DETERRING THE	EFT OF CONSUM	MERS USING PORTABLE	E PERSONAL SHOPPING S	SOLUTIONS IN A RETAIL	
APPLN. TYPE	SMALL ENTITY	ISSUE F	EE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1400		\$300	\$1700	06/30/2005	
EXAM	EXAMINER		TIV	CLASS-SUBCLASS]	,	
FRANKLIN, JAMARA ALZAIDA		2876		235-385000			
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).							
\Box				(1) the names of up to 3 registered patent attorneys 1 <u>Jeanine S. Ray-Yarlet</u> to ragents OR, alternatively,			
Address form PTO/SB/122) attached. (2) the name of th				of a single firm (having as a member a 2			
Tee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
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PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.							
(A) NAME OF ASSIGNEE (B			B) RESIDENCE: (CITY and STATE OR COUNTRY)				
INTERNATIONAL BUSINESS MACHINES CORPORATION			ARMONK, NEW YORK				
Please check the appropriate assignee category or categories (will not be printed on the patent):							
4a. The following fee(s) are e	enclosed:		Payment of Fee(s):				
☑ Issue Fee			A check in the amount of the fee(s) is enclosed.				
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Advance Order - # of Copies			The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number $09-1990$ (enclose an extra copy of this form).				
5. Change in Entity Status (a. Applicant claims SM	from status indicated above MALL ENTITY status. See 3)	_		LL ENTITY status. See 37 CI		
The Director of the HSPTO is	s requested to apply the Issu	e Fee and Dublicat	ion Foo (if ony) o	* * o = o = =	y paid issue fee to the applica stered attorney or agent; or th		
Authorized Signature	forme (1-Gl	d s		ne 22, 2005		
Typed or printed name	Jeanine S. Ray	Yarlette		Registration	No. 39,808		
This collection of information an application. Confidentialit submitting the completed ap- this form and/or suggestions Box 1450, Alexandria, Virgin Alexandria, Virginia 22313-1 Under the Paperwork Reducti	y is governed by 33 0.3.C. olication form to the USPTC for reducing this burden, shair 22313-1450. DO NOT S 450.	D. Time will vary ould be sent to the SEND FEES OR C	depending upon to Chief Information	on is estimated to take 12 n he individual case. Any co n Officer, U.S. Patent and RMS TO THIS ADDRESS		g gathering, preparing, and ne you require to complete artment of Commerce, P.O. for Patents, P.O. Box 1450,	
- Farmani aradian		roquired to resp	Point to a concent	m or miorination unicss it o	nspiays a valid ONIB control	number.	

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